

State of Rhode Island and Providence Plantations Department of Administration DIVISION OF TAXATION

One Capitol Hill, Providence, R.I. 02908

MONTHLY REPORT OF SHOW PROMOTER LOCATED WITHIN THE STATE OF RHODE ISLAND

	of19	
Name of Promoter	Permit	No. P
Address of Promoter		
(DUE ON OR BEFORE THE TW Attach separ	ENTIETH DAY OF THE MONTH FOLLOWING THE Schedule A for each show lo	HE MONTH COVERED)
	SCHEDULE A	
Address of Show	Dates of Show	
List below the names, addre you permitted to display or and drink at the above show	sses and sales tax permit numbe sell tangible personal propert location. Attach additional s	ers of every person ty, services or food sheets if necessary.
NAME	ADDRESS	SALES TAX PERMIT NO.
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Signature	Title	Date